

PTO/SB/17 (10-07)

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Fees pursuant to the Con	Application Number 1		0/561,246-Conf. #5994				
FEET	Filing Date M		lay 1, 2006				
_	THOUTHANDS WITCH		lideki Sato				
For FY 2008			Examiner Name	Name K. T. Chen			
Applicant claims	Art Unit 1792						
TOTAL AMOUNT OF PAYMENT (\$) 0.00			Attorney Docket No. 31238-226496				
METHOD OF PAY	MENT (check a	Il that apply)					
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP							
For the above	-identified depos	sit account, the Director i	s hereby authoriz	ed to: (check	all that apply)		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATIO	N						
1. BASIC FILING, SE	ARCH, AND EX	AMINATION FEES					
	FIL	.,,	ARCH FEES		TION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity \$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility	310	155 510	255	210	105		
Design	210	105 100	50 ·	130	65		
Plant	210	105 310	155	160	80		····
Reissue	310	155 510	255	620	310		
Provisional	210	105 0	0	0	0		
2. EXCESS CLAIM FE	EES		1			Fee (\$)	Small Entity
Fee Description							<u>Fee (\$)</u>
Each claim over 20 (including Reissues)						50 210	25
Each independent claim over 3 (including Reissues) Multiple dependent claims							105
		F (A) F	Doid (C)	8.510	tinia Dananda	370 nt Claims	185
<u>Total Claims</u> - 20 =	Extra Claims	Fee (\$) Fee	Paid (\$)		Multiple Depende		_
HP = highest number of to	otal claims paid for,			100	<u> </u>	ee Paid (S	2.1
Indep. Claims	Extra Claims	Fee (\$) Fee	Paid (\$)	·			
-3=	×	=					
HP = highest number of in	ndependent claims p	paid for, if greater than 3.	•				
listings under 37	nd drawings exe CFR 1.52(e)), tl	ceed 100 sheets of paper ne application size fee d 5 U.S.C. 41(a)(1)(G) and	ue is \$260 (\$130	for small enti	•	•	60
Total Sheets	Extra Sheets	Number of each	additional 50 or fra	action thereof	Fee (\$)	<u>Fee</u>	Paid (\$)
100) =		_ (round up to a wh	ole number) x		:	
4. OTHER FEE(S) Fees Paid (\$)							
		fee (no small entity dis-	count)				
Other (e.g., late fil	ing surcharge):			<u> </u>			
SUBMITTED BY	1.1	111			· · · · · · · · · · · · · · · · · · ·		
Signature	bittell	Marke	Registration No. (Attorney/Agent)	33,074	Telephone	(202) 34	14-4000
Name (Print/Type) Cath	nerine M. Voor	hees			Date	June 27	7. 2008

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